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THE "MEDICAL RECORD'S" POSITION EDITO-
RIALLY, AS TO THE VALUE OF EX-
SECTION FOR HIP DISEASE.

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When a medical journal has acquired through the enterprise of its publishers and the talent of its editor the extensive circulation and wide spread influence of the "Record," its editorial department yields a power for good, or for evil, that is of the gravest importance to every thoughtful physician who wishes to see truth prevail, and error repressed.

It is a debatable question, in my opinion, if it would not be safer and better for suffering humanity, and for the profession, if editorial comment should be so guarded as not to trench arbitrarily a subject of such vital importance as that of exsection for hip disease. It will appear to the least observant surgeon that possibly the editor of a medical journal, however capable, may not always be able to determine accurately all of the facts of any special or particularly difficult subject, and the columns of his journal, rather than the editorial space, would be a more fitting place for the proper illumination of such subject. A decided expression of opinion editorially,



precludes, at least in the journal that utters it, further discussion, and with a large number of its readers, so shapes opinion as to effectually decide the merits of any question, without a hearing from those who may have given special attention to it, and who might claim the right to dissent from the conclusions of the editor. Fortunately however, there is a goodly number of thoughtful and self-reliant physicians who are not so pliant; and who, in the matter of statistics even, do not entertain for statistical reports generally, that profound respect which is shown for them by the editor of the "Record."

In the "Medical Record" of March, 27th, 1886, is a leading editorial entitled "The indications for exsection for hip disease." The Editor informs us that in the "Annals of Surgery" for Jan. 1886, "Dr. Leroy M. Yale has reviewed this subject in a thorough manner, and has collected statistics which enable one to reach tolerably positive conclusions." After commenting on Dr. Yale's article and quoting his statistics, the editor remarks that "Assuming therefore that about one-third die, and one fifth relapse, it follows that the successes in excision amount to only about fifty three per cent. "This is about the same per centage of cures given by Cazin in "eighty cases treated expectantly, the cases being followed up for "five years." To quote the "Record" further: "No very brilliant "results, as far as cures are concerned, therefore can be attributed to "excision." "As to the claim for better functional results, this has "not at least a very strong basis. We are inclined to believe, says "the editor of the 'Record,' from the evidence so far accumulated, "that patients treated expectantly, as a rule, get a better limb." At the same time, significantly remarks the editor, *the operation of excision occasionally gives most brilliant results:* (the italics are my own.)

My feelings may be better imagined than described, when I explain that I read this remarkable editorial just after having that day done an excision for hip disease, and the second one of two excisions for hip disease, which I had performed within the period of three weeks.

I confess that I was much disturbed for a while, but soon re-

covered my equanimity as I reflected that I was personally acquainted with these eminent statisticians, with the exception of M. Cazin; and indeed I was quite reassured when I found that I had not wholly lost my individuality in the confusion of thought, which the startling statements I have quoted momentarily created within me. However I was eager for a crumb of comfort, and I snapped like a hungry trout at a fly, at the consoling remark of the editor, "that the operation of excision occasionally gives most brilliant results," and I naively asked myself,—Why! But I also thought of my good friend, Dr. Louis A. Sayre, and how I had profited by his writings, and that his excellent practical work on orthopedic surgery was about to be translated into German, and appreciated across the water, and that surely his statistics, I could rely on as I could my own energy, will, painstaking care, knowledge and self-possession. Thereupon after these brief reflections, I sat down and poured out on paper the overflowings of my thoughts to my good old friend on the general futility of statistics, as ordinarily collected by the average gatherer of statistics; and I received from Dr. Sayre an equally characteristic letter as my own; and if I succeed half as well in eliciting the interest of my readers in what I have to say to them, as I did in calling forth that of Dr. Sayre's, interspersed here and there with the remarks which I propose to offer, with some of the appropriate and terse expressions used in his letter, I shall have accomplished my object; that is to partly undo some of the evils of an injudicious editorial.

Nothing would, at first sight, seem more convincing than a formidable array of statistics. Buckle formulated certain general laws of political economy based on statistics; notably that the number of marriages depends on the price of corn. Congressmen, when they wish to make an impressive and convincing address, overwhelm us with statistics. And following the fashionable lead of statesmen and historians, medical men formulate rules of practice based on statistics, and thus attempt to restrict or enlarge our powers of usefulness by statistical rules. That statistics are valuable to show what is the average general result of the action of certain physical or natural forces, operating under well defined conditions,

is an accepted fact. But the want of accuracy in determining the influencing conditions, even when the conditions are related to the most common and readily collected facts, has often impaired the value of statistics to such a degree as to make them utterly worthless. The special object of this communication is briefly to point out the falsity of statistical rules, based on ~~the~~ unknown and imperfectly stated conditions, as a guide to surgical treatment. We are told that this eminent hospital surgeon, or that, that general practitioner, has operated so many times for ovariectomy, or for exsection in hip disease, with such and such results; but we are left in entire ignorance of numerous details, or of circumstances, which remarkably influence the treatment, besides, often we take no account whatever of the individuality of the surgeon, which is one of the largest factors in the result. We are probably reminded of the fact that the operating surgeon is a titled and eminent author or professor, and we are told, of course, his results are consequently of the most significant value, evidently we forget that, as Junius remarks, to the Reverend Mr. Horne, "distinguished talents are not necessarily connected with discretion;" and that some obscure country doctor, well grounded in the principles of pathology, and having a fair knowledge of anatomy, and possessed of good common sense, is sometimes more than the peer of the eminent author in any case of surgical emergency. In fact, the very conditions that often most influence the result, are inherent in the surgeon himself, and of which statistics can make no mention.

The value of statistics to determine what the average man can or will do under certain well defined circumstances; whether, for example, he will live to three score and ten years, whether he will go crazy or die a drunkard, is of interest in a general way to society. The results of the after treatment of a surgical operation, which requires as much judgment, industry, scrupulous care, common sense and untiring energy as is demanded for the proper treatment of an excision in hip disease, are of extreme interest to the surgeon, and yet the results are gathered much in the same way as are collected the statistics of the number of babies born; and learned statisticians thereupon establish rules for the treatment of hip dis-

ease on the expectant plan. In connection with this subject, I cannot do better than to quote from Dr. Sayre's letter to me: "To talk," says Dr. Sayre, "of conservative surgery, with its years of anguish, finally resulting in a hideous deformity, with an anchylosed and often useless limb, in comparison with the immediate removal of all diseased tissue, and the rapid improvement of the general health in all cases, and the frequent perfect recovery with a useful limb, and in many cases with almost perfect motion, is the veriest nonsense."

To know what the average man can do, and will do under stated conditions, is certainly an interesting question for the speculative student of man's place in creation; and it would be equally interesting, but more pertinent to the present subject to know what the average doctor can, and will do in the treatment of a difficult case of ovariectomy, or of exsection for hip disease. I hope I may not be thought to be too presumptuous if I express it as my opinion, that the result will not be altogether the best that could be desired. I may be told that the cases of hip joint exsection tabulated, were not treated by average doctors, but by eminent surgeons; I do not doubt this, but I refuse to accept the proposition that eminent standing is in every case the companion of proper qualification, or of good judgment, either in the surgeon, himself, or in his alleged skilled assistants, not to mention other qualities of character equally important. Indeed, I am so bold as to assert, that I believe that such men as Sayre, in America, and Bryant and Holmes, in England, certainly so far as exsection for hip disease is concerned, are far above the average of surgeons, and that if we did not have such men to lead us, and we were not willing to be led by them, that so far as regarded this operation and surgery generally, that under the teachings of the expectant plan, that hip disease and surgery generally, would soon be relegated to the barber's care, as it was a few centuries ago.

That this statement is not exaggerated, I have only to ask what is it that the average man in the most civilized community can do when left to himself, outside of a very few things; possibly one of them to draw up a table of statistics. Paralyze the efforts gener-

ally of the most active, industrious and reflecting men by a general mandate of the profession encouraging the expectant treatment, to accommodate the lazy, envious and conservative human creatures that are opposed to laborious and emulative effort; and what would be the condition of surgery, even if there remained a few earnest and indefatigable workers, their efforts would not be appreciated by the average doctor, and possibly the actual cautery would again take the place of the ligature in amputations, and amulets and charms replace the most judiciously compounded prescriptions; just as the Spaniards, under Hernando de Soto, after being reduced to dire necessity, were found marching and fighting, dressed and armed like savage indians.

The highest degree of surgical progress cannot be transmitted by a small number of surgeons, be they ever so great as leaders and teachers; they must have the co-operation of the profession; there must be a division of labor, which fits each individual doctor into a complex and effective organization for the general good of the world. Even the maker of surgical statistics may fit his place in this organization, like a well fitting peg under the direction and mental guidance of a master mind; but if left to himself is only fit to tell poorly what the average man can do.

As Edmund About remarks, the merest trifle that costs next to nothing in a civilized land, such, for example, as the modern means of obtaining fire from a match, has been the product of incalculable labor, yet what would the average civilized man do if he had no matches, or other civilized means of obtaining fire; rubbing two sticks together would cause exhaustion sooner than a spark; and the ancient fire drill is unknown to him.

What would the average surgeon do without the constant guidance and instruction of such leaders as those cited, left alone with his patients to the pitiless teachings of expectant surgery. Publish throughout the length and breadth of this country that expectant surgery is the best treatment for hip disease, which I deny, and all the indolent and incompetent doctors, and conservative old ladies of the profession, of the male sex, who are opposed to progress; and who are appalled at the pains-taking care, labor and sharpening of the wits required to conduct properly the after treatment of an excision for hip disease, would applaud the teachers of expectant treatment.

